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VIA FACSIMILE: 1-571-273-8300

Atty. Docket No. COR22 P-301

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Art Unit

3635

Examiner

Yvonne M. Horton Thomas N. Corwin

Applicant Appln, No.

10/621,905

Filing Date

July 17, 2003

Confirmation No.

2135

For

VENTED INSULATED BUILDING

Mail Stop AF Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

Dear Sir:

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that the following papers are being transmitted by facsimile to the Patent and Trademark Office on the date shown below:

- Claims As Amended Cover Sheet (in duplicate), and 1.
- Response consisting of three (3) pages. 2.

YOU SHOULD RECEIVE A TOTAL OF 8 PAGES.

March 22, 2006

Date

Deborah a. Clark Deborah A. Clark

Price, Heneveld, Cooper, DeWitt & Litton, LLP

695 Kenmoor, S.E. Post Office Box 2567

Grand Rapids, Michigan 49501

(616) 949-9610

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P.O. Box 1450

Alexandria, Virginia 22313-1450

Dear Sir:

Transmitted herewith is the Amendment in response to the Office Action mailed January 3, 2006 for the above-identified application.

Any fee for additional claims has been calculated as shown below:

CLAIMS AS AMENDED

	Col. 1		Col. 2	Col. 3	Small	Entity	Other Than A Small Entity	
	Claims Remaining After Amendment		Highest No. Previously Paid For	Present Extra	Rate	Add'l Fee	Rate	Add'l Fee
Total Claims	* 1	Minus	** 2 0	= 0	x \$25	\$0	X \$ 50	\$
Independent Claims	*1	Minus	*** 3	= 0	x 100	\$0	X \$200	\$
	testion of Multiple	Depender	nt Claims \$180	-		\$0	X \$360	\$
	resentation of Multiple Dependent Claims \$180 L ADDITIONAL FEE FOR THIS AMENDMENT					\$0		\$

^{*} If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

^{**} If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

Fax: 6169578196

Applicant

Thomas N. Corwin

Appin. No.

10/621,905

Page

If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, write "3" in *** this space.

The "Highest No. Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

Each Additional Group of 50 Pages That Exceeds 100 Pages

Col. 1		Col. 2	Col. 3	Small Entity		Other Than A Small Entity	
No. of Groups Remaining After Amendment		Highest No. of Groups Previously Paid For	Present Extra Groups	Rate (each add'l 50 pages over 100)	Add'lFee	Rate (each add'l 50 pages over 100)	Add'l Fee
1	Minus	*2	=**0	х \$125	\$0	X \$250	\$

One "group" is a set of 50 application (specification, claims, abstract, and drawings) pages.

- If the entry in Col. 2 is more than the entry of Col. 1, write "0" in Col. 3
- If the entry in Col. 3 is not "0," pay the required fee.
- Small entity status of this application 37 CFR §§1.9 and 1.27 has been 1. established by a verified statement previously submitted or is enclosed.
- No additional fee is required. 2.
- A fee of \$ __ to cover the cost of the additional claims added by this response 3. is enclosed.
- A fee of \$ to cover the application size fee is enclosed. 4.
- Please charge any additional fees or credit overpayment to Deposit Account No. 5. 16 2463. A duplicate copy of this sheet is attached.

Respectfully submitted,

March 22, 2006	Guntly & Lini
Date	Gunther J. Evanina, Registration No. 35 502
	Price, Heneveld, Cooper, DeWitt & Litton, LLP
	695 Kenmoor, S.E.
	Post Office Box 2567
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GJE/dac

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First Presen	tation of Multiple	Dependen	t Claims \$180			\$0	X \$360	\$
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT \$0 \$						\$		

If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, write "20" ** in this space.

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Applicant

Thomas N. Corwin

Appin. No. Page

10/621,905

: 2

MAR 2 2 2806

If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest No. Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

Each Additional Group of 50 Pages That Exceeds 100 Pages

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	Col. 1		Col. 2	Col. 3	Small Entity		Other Than A Small Entity	
	No. of Groups Remaining After Amendment		Highest No. of Groups Previously Paid For	Present Extra Groups	Rate (each add'l 50 pages over 100)	Add'lFee	Rate (each add'l 50 pages over 100)	Add'1 Fee
	1	Minus	*2	=**0	x \$125	\$0	X \$250	\$

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- * If the entry in Col. 2 is more than the entry of Col. 1, write "0" in Col. 3
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- 1. Small entity status of this application 37 CFR §§1.9 and 1.27 has been established by a verified statement previously submitted or is enclosed.
- 2. X No additional fee is required.
- 3. A fee of \$ to cover the cost of the additional claims added by this response is enclosed.
- 4. A fee of \$___ to cover the application size fee is enclosed.
- 5. X Please charge any additional fees or credit overpayment to Deposit Account No. 16 2463. A duplicate copy of this sheet is attached.

Respectfully submitted,

March 22, 2006	Gunther J. Evanisa, Registration No. 35 502
Date	Gunther J. Evanina, Registration No. 35 502
	Price, Heneveld, Cooper, DeWitt & Litton, LLP
	695 Kenmoor, S.E.

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Mar 22 2006 16:38

P. 06

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Dear Sir:

RESPONSE

In response to the Office Action mailed January 3, 2006, Applicant requests reconsideration in view of the following remarks.

There are no amendments made to the claims in this response, and thus a listing of the claims is not presented herein.

Remarks begin on page 2 of this paper.